

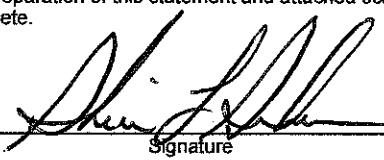


MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**BALLOT QUESTION COMMITTEE
COVER PAGE**

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and signed by the treasurer or designated record keeper.

1. Committee I.D. Number 150415		3. This Statement covers From: <u>05/30/12</u> To <u>07/22/12</u>	
2. Committee Name Protect Bangor's Future		4. Committee's Mailing Address 3535 Old Kawkawlin Rd. Bay City, MI 48706 Area Code and Phone <u>(989) 686-7680</u> <small>If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.</small>	
5. Treasurer's Name and Residential Address Sheri L. Schumann 2939 Bangor Road Bay City, MI 48706 Area Code and Phone <u>(989) 684-8182</u>			
6. Treasurer's Business Address 3535 Old Kawkawlin Road Bay City, MI 48706 Area Code and Phone <u>(989) 684-7680</u>		7. Designated Record Keeper's Name and Mailing Address (If the committee has a Designated Record Keeper) Richard Donahue 3683 Kawkawlin River Dr. Bay City, MI 48706 Area Code and Phone <u>(248) 330-8574</u>	
8. TYPE OF STATEMENT: 8a. <input checked="" type="checkbox"/> PRE-ELECTION OR 8b. <input type="checkbox"/> POST-ELECTION Pre-Election or Post-Election Statement relates to: <input checked="" type="checkbox"/> PRIMARY <input type="checkbox"/> GENERAL <input type="checkbox"/> SCHOOL <input type="checkbox"/> SPECIAL Date of Election: <u>08/07/12</u>		8c. <input type="checkbox"/> ANNUAL STATEMENT (_____ Coverage Year) 8d. <input type="checkbox"/> QUALIFICATION OR <input type="checkbox"/> NON-QUALIFICATION STATEMENT (Required of State-wide Ballot Question Committees Only) Date of Qualification or Non- Qualification: _____ 8e. <input type="checkbox"/> AMENDMENT TO CAMPAIGN STATEMENT (Complete Item 8a, 8b, 8c 8d, or 8f to indicate which Statement is being amended) 8f. <input type="checkbox"/> DISSOLUTION OF COMMITTEE Effective Date of Dissolution _____ <small>By checking this item, I certify that the committee has no assets or outstanding debts, including late filing fees. Note: The disposition of residual funds must be reported on Schedule 4B and the Summary Page.</small>	
<p>A committee that does not have a Reporting Waiver must file all required Campaign Statements. The Campaign Statements must include all applicable Schedules. Direct contributions, in-kind contributions, loans, expenditures and outstanding debts count against the \$1,000 Reporting Waiver threshold.</p> <p>If any of the information listed in items 4, 5, 6, or 7 has changed since the information was shown on the committee's Statement of Organization, an amendment to the Statement of Organization should accompany this Campaign Statement. If a request for a Reporting Waiver is not received on or before the filing deadline of a required campaign statement, that campaign statement can not be waived.</p>			
9. Verification: I certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my knowledge and belief the contents are true, accurate and complete.			
Current Treasurer or Designated Record Keeper Sheri L. Schumann Type or Print Name		Signature <u></u> Date <u>7/25/12</u>	

FILED
JUL 26
9 10 AM '12



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**SUMMARY PAGE
BALLOT QUESTION COMMITTEE**

1. Committee I.D. Number 150415

2. Committee Name Protect Bangor's Future

RECEIPTS		Column I This Period	Column II Cumulative for Election Cycle
3. Contributions			
a. Itemized Contributions (Schedule 4A, Column 6)	(3a.) \$	<u>6,151.01</u>	
b. Unitemized Contributions (less than \$20.01 - no Schedule)	(3b.) \$	<u>NOT APPLICABLE</u>	
c. Subtotal of Contributions	(3c.) \$	<u>6,151.01</u>	(18.) \$ <u>6,151.01</u>
4. Other Receipts (Schedule 4A-1, Column 6)	(4.) \$	<u></u>	(19.) \$ <u></u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3 c + Line 4)	(5.) \$	<u>6,151.01</u>	(20.) \$ <u>6,151.01</u>
IN-KIND CONTRIBUTIONS			
6. In-Kind Contributions			
a. Itemized In-Kind Contributions (Schedule 4-IK, Column 7)	(6a.) \$	<u>180.83</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(6b.) \$	<u>NOT APPLICABLE</u>	
7. TOTAL IN-KIND CONTRIBUTIONS (Add Line 6a + Line 6b)	(7.) \$	<u>180.83</u>	(21.) \$ <u>180.83</u>
EXPENDITURES			
8. Expenditures			
a. Itemized Direct Expenditures (Schedule 4B, Column 7)	(8a.) \$	<u>3,813.77</u>	
b. Itemized Get-Out-The Vote (Schedule 4B-G, Column 6)	(8b.) \$	<u></u>	
c. In-Kind Expenditures - Purchase of Goods or Services (Schedule 4B-2, Column 7)	(8c.) \$	<u></u>	
d. Unitemized Expenditures (\$50.00 or less-no Schedule)	(8d.) \$	<u></u>	
e. Subtotal of Expenditures	(8e.) \$	<u>3,813.77</u>	(22.) \$ <u>3,813.77</u>
9. Independent Expenditures (Schedule 4B-1, Column 7)	(9.) \$	<u></u>	(23.) \$ <u></u>
10. TOTAL EXPENDITURES (Add Line 8e + Line 9)	(10.) \$	<u>3,813.77</u>	(24.) \$ <u>3,813.77</u>
IN-KIND EXPENDITURES			
11. Total In-Kind Expenditures-Endorsements, Donations or Loans of Goods or Services (Schedule 4B-2, Column 8)	(11.) \$	<u></u>	(25.) \$ <u></u>
DEBTS AND OBLIGATIONS			
12. Debts and Obligations			
a. Owed by the Committee (Schedule 4E)	(12a.) \$	<u></u>	
b. Owed to the Committee (Schedule 4E)	(12b.) \$	<u></u>	
BALANCE STATEMENT			
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$	<u>301.00</u>	
14. Amount received during reporting period (Line 5, Column I, Total Contributions & Other Receipts)	(14.) +	<u>6,151.01</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) =	<u>6,452.01</u>	
16. Amount expended during reporting period (Line 10, Column I, Total Expenditures)	(16.) -	<u>3,813.77</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$	<u>2,638.24</u>	*

*If your ending balance is negative, please recheck your math.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 150415

2. Committee Name Protect Bangor's Future

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.

6. Amount

7. Cumulative for
Election Cycle for Each
Contributor (Through
date of receipt)

3. Contribution # 1

4. Date of Receipt 05/30/12

Name & Address:

Leitermann, Donna
4072 Richlyn Ct.
Bay City, MI 48706

\$ 1.00 \$ 1.00

[Click Here for Memo Itemization](#)

5. If over \$100.00 cumulative, please provide:

Occupation Treasurer Employer Charter Township of Bangor

Business Address 180 State Park Dr., Bay City, MI 48706

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 2

4. Date of Receipt 05/30/12

Name & Address:

Bangor Firefighters Local 1682
1000 W.N. Union
Bay City, MI 48706

\$ 1000.00 \$ 1000.00

[Click Here for Memo Itemization](#)

5. If over \$100.00 cumulative, please provide:

Occupation Union Employer Charter Township of Bangor

Business Address 180 State Park Dr., Bay City, MI 48706

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 3

4. Date of Receipt 06/15/12

Name & Address:

Bublitz, Dawn
3322 E. Gregg Dr.
Bay City, MI 48706

\$ 100.00 \$ 100.00

[Click Here for Memo Itemization](#)

5. If over \$100.00 cumulative, please provide:

Occupation Clerk Employer Charter Township of Bangor

Business Address 180 State Park Dr., Bay City, MI 48706

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 4

4. Date of Receipt 06/15/12

Name & Address:

Donahue, Richard
3683 Kawkawlin River Dr.,
Bay City, MI 48706

\$ 200.00 \$ 200.00

[Click Here for Memo Itemization](#)

5. If over \$100.00 cumulative, please provide:

Occupation Fire Chief Employer Charter Township of Bangor

Business Address 180 State Park Dr., Bay City, MI 48706

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal

\$ 1,301.00

Grand Total of All Schedules 4A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 150415

2. Committee Name Protect Bangor's Future

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
<p>3. Contribution # 1 Name & Address: Bangor Homes Non Profit Housing Corp. 3325 Alarie Dr. Bay City, MI 48706</p> <p>4. Date of Receipt <u>06/14/12</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer <u>Bangor Homes Housing Corp.</u> Business Address <u>3325 Alarie Dr., Bay City, MI 48706</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		\$ <u>100.00</u>	\$ <u>100.00</u>
		Click Here for Memo Itemization	
<p>3. Contribution # 2 Name & Address: Bishop, Richard 4193 Sherry Ct. Bay City, MI 48706</p> <p>4. Date of Receipt <u>06/20/12</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Trustee</u> Employer <u>Charter Township of Bangor</u> Business Address <u>180 State Park Dr., Bay City, MI 48706</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		\$ <u>100.00</u>	\$ <u>100.00</u>
		Click Here for Memo Itemization	
<p>3. Contribution # 3 Name & Address: Davis, Becky 3921 Ranch Dr., Bay City, MI 48706</p> <p>4. Date of Receipt _____</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Housewife</u> Employer _____ Business Address <u>3921 Ranch Dr., Bay City, MI 48706</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		\$ <u>300.00</u>	\$ <u>300.00</u>
		Click Here for Memo Itemization	
<p>3. Contribution # 4 Name & Address: Middleton, Donald 1112 N. Chilson Bay City, MI 48706</p> <p>4. Date of Receipt <u>06/25/12</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Reserve</u> Employer <u>Charter Township of Bangor</u> Business Address <u>180 State Park Dr., Bay City, MI 48706</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		\$ <u>100.01</u>	\$ <u>100.01</u>
		Click Here for Memo Itemization	

Page Subtotal

\$600.01

Grand Total of All Schedules 4A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 150415

2. Committee Name Protect Bangor's Future

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: Froncek, Neil 4107 Alexandria Boulevard Bay City, MI 48706 4. Date of Receipt <u>06/27/12</u>		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Trustee</u> Employer <u>Charter Township of Bangor</u> Business Address <u>180 State Park Dr., Bay City, MI 48706</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: Sarnowski, Belinda 3939 Bangor Road Bay City, MI 48706 4. Date of Receipt <u>07/01/12</u>		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Phlebotomist</u> Employer <u>Quest Diagnostics</u> Business Address <u>200 S. Wenona St., Bay City, MI 48706</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: Schuch, Scott 605 E. Fulton St. Bay City, MI 48706 4. Date of Receipt <u>07/02/12</u>		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Firefighter</u> Employer <u>Charter Township of Bangor</u> Business Address <u>180 State Park Dr., Bay City, MI 48706</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: Susan Kuipers 434 State Park Dr. Bay City, MI 48706 4. Date of Receipt <u>07/02/12</u>		\$ <u>20.00</u>	\$ <u>20.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>K&K State Park Grocery</u> Business Address <u>434 State Park Dr., Bay City, MI 48706</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **\$320.00**

Grand Total of All Schedules 4A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 150415

2. Committee Name Protect Bangor's Future

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: Geneseo, Randy 308 N. Euclid Ave. Bay City, MI 48706		4. Date of Receipt <u>07/02/12</u> \$ <u>20.00</u>	\$ <u>20.00</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Midas</u> Business Address <u>308 N. Euclid Ave.</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 2 Name & Address: Baranek, Patricia 3052 E. Fisher Rd. Bay City, MI 48706		4. Date of Receipt <u>06/28/12</u> \$ <u>20.00</u>	\$ <u>20.00</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation <u>Sales</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 3 Name & Address: Bailey, Kenneth State Park Dr. Bay City, MI 48706		4. Date of Receipt <u>06/27/12</u> \$ <u>100.00</u>	\$ <u>100.00</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation <u>Fire Marshal</u> Employer <u>Charter Township of Bangor</u> Business Address <u>180 State Park Dr., Bay City, MI 48706</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4 Name & Address: Moore, Jr. Ronald L. 3621 Boy Scout Rd., Bay City, MI 48706		4. Date of Receipt <u>07/02/12</u> \$ <u>100.00</u>	\$ <u>100.00</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation <u>Firefighter</u> Employer <u>Charter Township of Bangor</u> Business Address <u>180 State Park Dr., Bay City, MI 48706</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal

\$240.00

Grand Total of All Schedules 4A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A

BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 150415

2. Committee Name Protect Bangor's Future

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: Klowalski, David 823 N. Euclid Ave. Bay City, MI 48706		4. Date of Receipt <u>06/27/12</u> \$ <u>100.00</u>	\$ <u>100.00</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Euclid Automotive Supply, Inc.</u> Business Address <u>823 N. Euclid Ave., Bay City, MI 48706</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 2 Name & Address: Michael Hayes 505 S. Euclid Ave. Bay City, MI 48706		4. Date of Receipt <u>06/27/12</u> \$ <u>50.00</u>	\$ <u>50.00</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation <u>50.00</u> Employer <u>Michael Hayes Agency, LLC</u> Business Address <u>505 S. Euclid Ave., Bay City, MI 48706</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 3 Name & Address: Santos, Pedro 4646 Morningside Dr. Bay City, MI 48706		4. Date of Receipt <u>06/28/12</u> \$ <u>100.00</u>	\$ <u>100.00</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation <u>Electrician</u> Employer <u>General Motors</u> Business Address <u>1001 Woodside Ave. Bay City, MI 48708</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4 Name & Address: Leitermann, Donna 4072 Richlyn Ct., Bay City, MI 48706		4. Date of Receipt <u>06/20/12</u> \$ <u>100.00</u>	\$ <u>101.00</u> Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation <u>Treasurer</u> Employer <u>Charter Township of Bangor</u> Business Address <u>180 State Park Dr., Bay City, MI 48706</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal **\$350.00**

Grand Total of All Schedules 4A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 150415

2. Committee Name Protect Bangor's Future

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.

6. Amount

7. Cumulative for
Election Cycle for Each
Contributor (Through
date of receipt)

3. Contribution # 1

4. Date of Receipt 06/28/12

Name & Address:

Weiss, Randy
363 Hotchkiss Rd.
Bay City, MI 48706

\$ 75.00 \$ 75.00

[Click Here for Memo Itemization](#)

5. If over \$100.00 cumulative, please provide:

Occupation Owner Employer Splash-N-Dash, Inc

Business Address 363 Hotchkiss Rd., Bay City, MI 48706

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 2

4. Date of Receipt 06/27/12

Name & Address:

Schultz, Jon
8 State Park Dr.
Bay City, MI 48706

\$ 100.00 \$ 100.00

[Click Here for Memo Itemization](#)

5. If over \$100.00 cumulative, please provide:

Occupation Owner Employer The Bier Garten, Inc.

Business Address 8 State Park Dr., Bay City, MI 48706

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 3

4. Date of Receipt 07/01/12

Name & Address:

Eagle, Howard
3642 State Street Rd.
Bay City, MI 48706

\$ 100.00 \$ 100.00

[Click Here for Memo Itemization](#)

5. If over \$100.00 cumulative, please provide:

Occupation 100.00 Employer Charter Township of Bangor

Business Address 180 State Park Dr., Bay City, MI 48706

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 4

4. Date of Receipt 07/02/12

Name & Address:

Laroque, Sharon
3800 S. Huron
Bay City, MI 48706

\$ 50.00 \$ 50.00

[Click Here for Memo Itemization](#)

5. If over \$100.00 cumulative, please provide:

Occupation Owner Employer Bay Cycle

Business Address 3800 S. Huron, Bay City, MI 48708

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal

\$ 325.00

Grand Total of All Schedules 4A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 150415

2. Committee Name Protect Bangor's Future



Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: Willard, Michael 3741 Wilder Rd., Suite D Bay City, MI 48706	4. Date of Receipt <u>06/29/12</u>	\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Mike Willard Insurance Agency</u> Business Address <u>3741 Wilder Rd., Suite D, Bay City, MI 48706</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: Hunt, Jeff 4359 Wilder Rd. Bay City, MI 48706	4. Date of Receipt <u>07/02/12</u>	\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Jeff Hunt Agency</u> Business Address <u>4359 Wilder Rd., Bay City, MI 48706</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: Thelen Auto Group 1112 N. Euclid Ave. Bay City, MI 48706	4. Date of Receipt <u>07/02/12</u>	\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer <u>Thelen Auto Group</u> Business Address <u>1112 N. Euclid Ave., Bay City, MI 48706</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: DeVolder, Fay 3010 E. Midland Rd. Bay City, MI 48706	4. Date of Receipt <u>07/02/12</u>	\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>100.00</u> Employer <u>Tony E. DeVolder</u> Business Address <u>3010 E. Midland Rd., Bay City, MI 48706</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

\$350.00

Grand Total of All Schedules 4A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 150415

2. Committee Name Protect Bangor's Future

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>K & B Truck & Trailer, LLC</u> <u>3861 N. Euclid</u> <u>Bay City, MI 48706</u>		4. Date of Receipt <u>07/02/12</u>	
		<u>\$ 20.00</u>	<u>\$ 20.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>K & B Truck & Trailer, LLC</u> Business Address <u>3861 N. Euclid, Bay City, MI 48706</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: <u>Gilles, Pete</u> <u>366 State Park Dr.,</u> <u>Bay City, MI 48706</u>		4. Date of Receipt <u>07/02/12</u>	
		<u>\$ 20.00</u>	<u>\$ 20.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Gilles Glass & Mirror</u> Business Address <u>366 State Park Dr., Bay City, MI 48706</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>MI Professional Fire Fighters Union</u> <u>1651 Kingsway Ct., Suite E</u> <u>Trenton, MI 48183</u>		4. Date of Receipt <u>07/05/12</u>	
		<u>\$ 1500.00</u>	<u>\$ 1500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Union</u> Employer <u>MI Professional Fire Fighters Union</u> Business Address <u>1651 Kingsway Ct., Suite E Trenton, MI 48183</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>Davies, Randall</u> <u>349 State Park Dr.,</u> <u>Bay City, MI 48706</u>		4. Date of Receipt <u>07/03/12</u>	
		<u>\$ 50.00</u>	<u>\$ 50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Pleasurecraft Outfitters</u> Business Address <u>349 State Park Dr., Bay City, MI 48706</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **\$1,590.00**

Grand Total of All Schedules 4A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 150415

2. Committee Name Protect Bangor's Future

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
<p>3. Contribution # 1 Name & Address: Hardy, Patrick 3389 S. Huron Bay City, MI 48706</p> <p>4. Date of Receipt <u>07/02/12</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>J. P. Discount</u> Business Address <u>3389 S. Huron Bay City, MI 48706</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		\$ <u>100.00</u>	\$ <u>100.00</u>
		Click Here for Memo Itemization	
<p>3. Contribution # 2 Name & Address: Watson, Terry 93 River Trail Dr. Bay City, MI 48706</p> <p>4. Date of Receipt <u>07/03/12</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Supervisor</u> Employer <u>Charter Township of Bangor</u> Business Address <u>180 State Park Dr., Bay City, MI 48706</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		\$ <u>100.00</u>	\$ <u>100.00</u>
		Click Here for Memo Itemization	
<p>3. Contribution # 3 Name & Address: Hoppe, Jill 4030 Allen Ct. Bay City, MI 48706</p> <p>4. Date of Receipt <u>07/10/12</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Teller</u> Employer <u>FinancialEdge</u> Business Address <u>1195 S. Euclid Ave., Bay City, MI 48706</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		\$ <u>100.00</u>	\$ <u>100.00</u>
		Click Here for Memo Itemization	
<p>3. Contribution # 4 Name & Address: Schisler, Scott 4484 W. Park Dr. Bay City, MI 48706</p> <p>4. Date of Receipt <u>07/11/12</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Trustee</u> Employer <u>Charter Township of Bangor</u> Business Address <u>180 State Park Dr., Bay City, MI 48706</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		\$ <u>100.00</u>	\$ <u>100.00</u>
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Page Subtotal

\$400.00

Grand Total of All Schedules 4A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 150415

2. Committee Name Protect Bangor's Future

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: Sarnowski, Jerome 1400 S. Warner St. Bay City, MI 48706		4. Date of Receipt <u>07/07/12</u> \$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 2 Name & Address: Rivet, Joseph 2600 Center Ave. Bay City, MI 48706		4. Date of Receipt <u>07/13/12</u> \$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Drain Commissioner</u> Employer <u>County of Bay</u> Business Address <u>515 Center Ave., Bay City, MI 48706</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: Jacobs, Jon 4714 Gerald St. Bay City, MI 48706		4. Date of Receipt <u>07/12/12</u> \$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Firefighter</u> Employer <u>Charter Township of Bangor</u> Business Address <u>180 State Park Dr., Bay City, MI 48706</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: Willett, Floyd 3406 Hidden Rd. Bay City, MI 48706		4. Date of Receipt <u>07/16/12</u> \$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

\$275.00

Grand Total of All Schedules 4A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 4A
BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 150415

2. Committee Name Protect Bangor's Future

☒

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.

6. Amount

7. Cumulative for
Election Cycle for Each
Contributor (Through
date of receipt)

3. Contribution # 1

4. Date of Receipt 07/18/12

Name & Address: Bay City Fire Union

IAFF Local 116

PO Box 272

Bay City, MI 48707

\$ 250.00 \$ 250.00

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation Union

Employer City of Bay City

Business Address 301 Washington Ave., Bay City, MI 48708

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 2

4. Date of Receipt 07/16/12

Name & Address:

Tomaszewski, Jay

2025 Hatch Rd

Bay City, MI 48708

\$ 100.00 \$ 100.00

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation Firefighter

Employer Charter Township of Bangor

Business Address 180 State Park Dr., Bay City, MI 48706

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 3

4. Date of Receipt 07/14/12

Name & Address:

Seymour, Mark

2817 2 Mile Rd.

Bay City, MI 48706

\$ 50.00 \$ 50.00

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation Purchasing/IT Manager

Employer Metro Fabricating

Business Address 1650 Tech Dr., Bay City, MI 48706

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 4

4. Date of Receipt _____

Name & Address:

\$ _____ \$ _____

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser

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\$ 400.00

Grand Total of All Schedules 4A
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\$ 6,151.01

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED IN-KIND CONTRIBUTIONS
SCHEDULE 4-IK
BALLOT QUESTION COMMITTEE

1. Committee I. D. Number 150415

2. Committee Name Protect Bangor's Future

3. Name and Address from whom received If contribution is from an individual, please enter last name first.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution #1 Name & Address: Bay County Democratic Party PO Box 556 Pinconning, MI 48650 If over \$100.00 cumulative, please provide: Occupation Employer Name & Address:	4. <input type="checkbox"/> Loan endorsement or guarantee <input checked="" type="checkbox"/> Goods Donated or loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Others <input type="checkbox"/> Goods or Services Purchased by Others - LOAN Description <u>Bulk Stamp Permit</u> 5. DATE OF RECEIPT: <u>06/07/12</u> 6. VENDOR NAME & ADDRESS:	\$ <u>19.00</u>	\$ <u>19.00</u>
<input type="checkbox"/> Fund Raiser			
Contribution #2 Name & Address: Home Depot 3860 State Street Bay City, MI 48706 If over \$100.00 cumulative, please provide: Occupation Employer Name & Address:	4. <input type="checkbox"/> Loan endorsement or guarantee <input checked="" type="checkbox"/> Goods Donated or loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Others <input type="checkbox"/> Goods or Services Purchased by Others - LOAN Description <u>Post</u> 5. DATE OF RECEIPT: <u>07/12/12</u> 6. VENDOR NAME & ADDRESS:	\$ <u>161.83</u>	\$ <u>161.83</u>
<input type="checkbox"/> Fund Raiser			
Contribution #3 Name & Address: If over \$100.00 cumulative, please provide: Occupation Employer Name & Address:	4. <input type="checkbox"/> Loan endorsement or guarantee <input type="checkbox"/> Goods Donated or loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Others <input type="checkbox"/> Goods or Services Purchased by Others - LOAN Description _____ 5. DATE OF RECEIPT: _____ 6. VENDOR NAME & ADDRESS:	\$ _____	\$ _____
<input type="checkbox"/> Fund Raiser			

Page Subtotal

\$180.83

Grand Total of all Schedules 4-IK
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\$180.83

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED DIRECT EXPENDITURES
SCHEDULE 4B
BALLOT QUESTION COMMITTEE

1. Committee I. D. Number 150415

2. Committee Name Protect Bangor's Future

3. Name and address of person to whom paid	4. State purpose of expenditure. 5. Identify the ballot proposal involved. Indicate whether supported or opposed.	6. Date	7. Amount	8. Cumulative for election
Expenditure # 1 Name & Address: Stanley Sawicki & Son, Inc. 1521 W. Lafayette Detroit, MI 48216	4. Purpose: <u>Yard Signs</u> 5. Ballot Proposal: <u>Fire Millage Renewal</u>	07/02/12 Date of Expenditure	\$ <u>376.30</u>	\$ <u>376.30</u>
<input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	County: <u>Bay</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Local	Click for Memo Itemization Type		
Expenditure # 2 Name & Address: Bellsmith Graphic Design 1001 Center Ave., Suite 207 Bay City, MI 48708	4. Purpose: <u>Millage Flyer</u> 5. Ballot Proposal: <u>Fire Millage Renewal</u>	07/02/12 Date of Expenditure	\$ <u>963.88</u>	\$ <u>963.88</u>
<input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	County: <u>Bay</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Local	Click for Memo Itemization Type		
Expenditure # 3 Name & Address: Bangor Township 180 State Park Drive Bay City, MI 48706	4. Purpose: <u>Mailing Labels</u> 5. Ballot Proposal: <u>Fire Millage Renewal</u>	07/11/12 Date of Expenditure	\$ <u>17.98</u>	\$ <u>17.98</u>
<input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	County: <u>Bay</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Local	Click for Memo Itemization Type		
Expenditure # 4 Name & Address: Northeastern Paint 3950 N. Euclid Bay City, MI 48706	4. Purpose: <u>Paint Supplies</u> 5. Ballot Proposal: <u>Fire Millage Renewal</u>	07/11/12 Date of Expenditure	\$ <u>195.44</u>	\$ <u>195.44</u>
<input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	County: <u>Bay</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Local	Click for Memo Itemization Type		

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\$1,553.60

Grand Total of Schedules 4B
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED DIRECT EXPENDITURES
SCHEDULE 4B
BALLOT QUESTION COMMITTEE

1. Committee I. D. Number 150415

2. Committee Name Protect Bangor's Future

3. Name and address of person to whom paid	4. State purpose of expenditure. 5. Identify the ballot proposal involved. Indicate whether supported or opposed.	6. Date	7. Amount	8. Cumulative for election
Expenditure # 1 Name & Address: US Postmaster Bay City, MI 48708	4. Purpose: <u>Postage</u> 5. Ballot Proposal: <u>Fire Millage Renewal</u>	<u>07/12/12</u> Date of Expenditure	\$ <u>173.05</u>	\$ <u>173.05</u>
<input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	County: <u>Bay</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Local	Click for Memo Itemization Type		
Expenditure # 2 Name & Address: US Postmaster Bay City, MI 48708	4. Purpose: <u>Postage</u> 5. Ballot Proposal: <u>Fire Millage Renewal</u>	<u>07/12/12</u> Date of Expenditure	\$ <u>45.00</u>	\$ <u>218.50</u>
<input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	County: <u>Bay</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Local	Click for Memo Itemization Type		
Expenditure # 3 Name & Address: Northeastern Paint 3950 N. Euclid Bay City, MI 48706	4. Purpose: <u>Paint Supplies</u> 5. Ballot Proposal: <u>Fire Millage Renewal</u>	<u>07/13/12</u> Date of Expenditure	\$ <u>22.94</u>	\$ <u>218.38</u>
<input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	County: <u>Bay</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Local	Click for Memo Itemization Type		
Expenditure # 4 Name & Address: Sandlot Sports 1221 Salzburg Ave. Bay City, MI 48706	4. Purpose: <u>Tee-Shirts</u> 5. Ballot Proposal: <u>Fire Millage Renewal</u>	<u>07/19/12</u> Date of Expenditure	\$ <u>286.73</u>	\$ <u>286.73</u>
<input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	County: <u>Bay</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Local	Click for Memo Itemization Type		

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\$527.72

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED DIRECT EXPENDITURES
SCHEDULE 4B
BALLOT QUESTION COMMITTEE**

1. Committee I. D. Number 150415

2. Committee Name Protect Bangor's Future

3. Name and address of person to whom paid	4. State purpose of expenditure. 5. Identify the ballot proposal involved. Indicate whether supported or opposed.	6. Date	7. Amount	8. Cumulative for election
Expenditure # 1 Name & Address: Donna Leitermann 4072 Richlyn Ct. Bay City, MI 48706	4. Purpose: <u>Paint Supplies</u> 5. Ballot Proposal: <u>Fire Millage Renewal</u>	07/13/12 Date of Expenditure	\$ <u>13.10</u>	\$ <u>13.10</u>
<input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	County: <u>Bay</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Local	Click for Memo Itemization Type		
Expenditure # 2 Name & Address: Michael Samowski 3939 Bangor Road Bay City, MI 48706	4. Purpose: <u>Paint Supplies</u> 5. Ballot Proposal: <u>Fire Millage Renewal</u>	07/13/12 Date of Expenditure	\$ <u>6.14</u>	\$ <u>6.14</u>
<input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	County: <u>Bay</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Local	Click for Memo Itemization Type		
Expenditure # 3 Name & Address: Klender Design 3791 E. Wilder Road Bay City, MI 48706	4. Purpose: <u>Stencil</u> 5. Ballot Proposal: <u>Fire Millage Renewal</u>	07/13/12 Date of Expenditure	\$ <u>60.00</u>	\$ <u>60.00</u>
<input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	County: <u>Bay</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Local	Click for Memo Itemization Type		
Expenditure # 4 Name & Address: Bellsmith Graphic Design 1001 Center Ave., Suite 207 Bay City, MI 48708	4. Purpose: <u>Millage Flyer</u> 5. Ballot Proposal: <u>Fire Millage Renewal</u>	07/16/12 Date of Expenditure	\$ <u>1653.21</u>	\$ <u>2617.09</u>
<input type="checkbox"/> Check box if expenditure is payment of debt or obligation reported on previous statement <input type="checkbox"/> Fund Raiser	County: <u>Bay</u> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Local	Click for Memo Itemization Type		

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\$1,732.45

Grand Total of Schedules 4B
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\$3,813.77

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